"P10/\$8/06 (08:3/3)" "

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PATENT APPLICATION FEE DETERMINATION RECORD  Application of Doctor Number  Application of Doctor										489
CLAIMS AS FILED - PART I (Column 1) (Column 2)						SMALL I	SMALL ENTITY		OTHER THAN SMALL ENTITY	
				<b>─</b> ─	R EXTRA	RATE	FEE		RATE	FEE
BASIC FEE (37 CFR 1.16(a))						:295	OR		,790	
TOTAL CLAIMS					x :25=		OR	x.50=		
INDEPENDENT CLAIMS					x.100=		OR.	x300=		
(37 CFR 1.16(b)) minus 3 = 1				190	<u> </u>	OR	£360			
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))						[+3](X)	<del>                                     </del>	1	TOTAL	
* If the difference in column 1 is less than zero, enter *0* in column 2.										L
·~	1,5/040	LAIMS AS AME	ENDED -	PART II				`.	OTHE	TUAN
6	1,	(Column 1)		(Column 2)	(Column 3)	SMALL	ENTITY	OR -		R THAN ENTITY
٨		CLAIMS REMAINING		HIGHEST NUMBER	PRESENT	RATE	ADDI-		RATE	ADDI-
Z	i I	AFTER AMENDMENT	1	PREVIOUSLY PAID FOR	EXTRA		TIONAL FEE	_	<u> </u>	TIONAL FEE
ME	Total (37 CFR 1.16(c))	. 5	Minus	<del>"600</del>	=	x s 253=	1 .	OR	x.50	
MENDMENT	Independent (37 CFR 1.16(b))	. 3	Minus	<del>"(3)</del>	=	× •100=		OR	x. <u>200</u> 2	
AM	FIRST PRESENT	TATION OF MULTIPLE	E DEPENDEN	IT CLAIM (37 CF	R 1.16(d))	+180=		OR	+360	
						TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	
		(Column 1)		(Column 2)	(Column 3)			- ';	:	
ENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- : :: TIONAL - : FEE
	Total (37 CFR 1.16(c))	•	Minus	**	=	x s 55 =		OR	<u> × 50-</u>	
	Independent (37 CFR 1,16(b))	•	Minus	***	E	x:100=		_ OR	× (XXX)=	
AM	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))					+:180=		OR	+340=	
_	1					TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	
		(Column 1)		(Column 2)	(Column 3)			_		
N C		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
l ₩	Total (37 CFR 1.16(c))	*	Minus	••	=	× 85 =		OR	x 50_=	
AMENDMENT	Independent (37 CFR 1.16(b))	<del> </del>	Minus	•••	=	× 100 =		OR	, <u>200</u> 2	
4ME	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))					180=	1	OR	+360=	
H	FIRST PRESEN	TATION OF MOUNT	L DEFEROE	(57 0	TOTAL	+	OR	TOTAL ADD L FEE		
	If the entry in	column 1 is less th	an the entry	y in column 2, w	rite "0" in columi	ADD'L FEE 13.	L		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	L
	" If the "Highest	Number Previousl Number Previousl	lv Paid For	IN THIS SPACE	: is less than 20	), enter 20		tar banda	column 1	

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